

Office of Local Health
"Building Core Capacities in Public Health"

# Practice Standards of Performance for Local Boards of Health in New Jersey

Adopted February 18, 2003

## Goals

#### Multi-year "phased" approach to

- Modernize NJ's local public health system
- Assure the application of the most current practice and service delivery models
- Assure the citizens of NJ the highest quality and level of public health prevention, protection, and promotion

# Description

- Based on
  - 3 Core Functions of Public Health
    - Assessment, Policy Development & Assurance

**Essential Public Health Services** 

**HP 2010 "Public Health Infrastructure"** 

**HNJ 2010 "Strengthening Public Health Capacity"** 

**National LPHS Performance Instrument** 

## **Desired Outcome**



Improved local public health infrastructure using an integrated systems-based & coordinated approach

## Potential System Benefits

Improved health & a healthier population

Improved identification & handling of emergencies & disasters

Increased data collection & data-based knowledge & decision making

Increased ability to focus resources, target areas of need & develop justifications for additional funding

Increased capacity to partner with private & nonprofit health systems to leverage resources

Greater statewide capacity & infrastructure to strengthen all local programs

# Challenges

NJ's Current Local PH "System"

115 local health departments

16 county, 7 regional, 41 multi-municipal, 51 municipal

500+ local boards of health (1/3 of all, nationally)

Strong "Home Rule"

Patchwork geographical distribution

# Authority (since 1975)

NJSA 26: 3A2-2

'to assure a modern array of health services and to encourage efficient delivery by area-wide LHDs meeting Standards of Performance.'

- NJSA 26: 3A2-13
  - 'State Public Health Council shall (periodically) review Standards of Performance which shall include
    - (1) core standards applicable to all LHDs,
    - (2) supplemental standards to meet local needs.'

# Major Components

Sixteen (16) subchapters addressing

**Essential Public Health Services** 

- plus -

**Public Health Practice** 

**Administration** 

**Staffing** 

**Nursing and Health Education** 

**Performance Evaluation** 

# Key Requirements

- Regional Expertise and Capacity
- County-wide, Community Health
   Assessment and Improvement Planning
- Administration, Management and Leadership
- Staff Credentialing and Development
- Health Education / Promotion
- Public Health Nursing

# Key Requirements

- Epidemiology and Surveillance Capacity
- Personal and Clinical Preventive Health
- Community Linkages
- Data and Information Systems
- Emergency Response Capacity
- Enforcement of Public Health Laws
- Public Health Research
- Performance Evaluation and CQI

## Phase-In (over 4 years)

- Practice Standards Implementation Table
  - ensure enforcement of laws
- Upon adoption:
  - improve administrative services
  - continue categorical services
  - ensure emergency response capacity
  - ensure enforcement of laws
  - participate in governmental public health partnership
- Within 1 year
  - realign health education and nursing services with EPHS
  - implement "best practices"

## Phase-In (over 4 years)

- Within 2 years
  - acquire specialized regional expertise & capacity (planning, epidemiology, lab services, IT, etc.)
- Within 3 years
  - establish community linkages to personal & clinical services
- Within 4 years
  - complete county or multi-countywide community health assessment and health improvement plan

## Practice Standards Implementation

- Implementation meeting
  - January 2003
  - DHSS, NJHOA, NJACHO, NJLBOH,
     NJAPHNA, SOPHE, NJEHA, NJPHA,
     NJSNA, NJPHPA & Academia
- Goal
  - Develop an implementation strategy

## Practice Standards Implementation Strategy

- Statewide roll-out & support
- Development of tools that clearly outline requirements
- Guidance & training
- DHSS commitment to provide the above in timely manner

## Result

- Support of CDC & National Associations
- May 2003 implementation meetings
- Development of Resource Manual & Guide for LHDs - Toolkit
- DHSS support for major deliverables of the rules

#### Practice Standards Statewide Roll-out

- Phase 1 Assessment (2-15-04)
  - LHDs
    - APEX- PH, Part 1 (Organizational capacity & CQI)
    - LHER
  - LBOHs
    - National Public Health Performance Standards Local Public Health Governance Performance Assessment Instrument
    - Registration of Local Boards of Health

#### Practice Standards Statewide Roll-out

- Phase 2 Assessment (2-04 to 2-07)
  - Convene governmental partnership (2-04)
  - MAPP process (2-04 to 2-07)
    - Partnership development (Private & Public)
    - Visioning (goal development)
    - Performance of four assessments
    - Evaluation of assessments
    - Formulate goals & strategies (CHIP)
    - Action cycle implement CHIP

# NJDHSS Responsibilities

Leadership, policy, accountability, coordination, training, technical assistance, data / info, funding...

- Establish statewide health plan (HNJ 2010)
- Set policy through "Practice Standards"
- Develop and train in "best practices"
- Develop LHD evaluation & accountability methods (based on CQI process and national models)
- Support info technology
- Leverage funding
- Evaluate own capacity and performance

## References & Guidelines

- Healthy New Jersey 2010
- Healthy People 2010
- Core Functions & Essential PH Services
- LPHS Performance Assessment Instrument
- Public Health Workforce: Agenda for the 21st Century
- Council on Linkages, Core Public Health Competencies
- APEXPH1, MAPP, PACE EH

## Additional Information

www.state.nj.us/health/lh/olh.htm

 NJDHSS - Division of Local Public Health Practice and Regional Systems Development (609) 292-4993